## **CLAIMS ONLY**

SERIAL NO. FILING DATE

APPLICANT(S)

CLAIMS

|               | A            | AS FILED   |         | TER<br>NDMENT                                    |          | AFTER<br>2nd AMENDMENT |  |
|---------------|--------------|--|---------|--|----------|------------------------|--|
|               | IND.         | DEP.   | IND.    | DEP.   | IND.     | DEP.                   |  |
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| 19            |              |  |         |  |          |                        |  |
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| 23            | <u> </u>     | <u> </u>   |         |  |          |                        |  |
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| 48            |              | -  |         |  |          |                        |  |
| 49            |              |  |         |  |          |                        |  |
| 50<br>TOTAL   | -57          |  |         |  |          |                        |  |
| IND.          | 3            |  |         |  | ļ        |                        |  |
| TOTAL<br>DEP. | 19           | <b>—</b> [                                       |         | -  |          | <b>—</b>               |  |
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| 51              | _  |  |  |                |               |            |
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| 75              | <del>-</del>                                     | <del>                                     </del> | <del> </del>                                     |                |               |            |
| 76              | <del> </del>                                     | <del>  -</del>                                   | <del>                                     </del> |                |               |            |
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| 80              | <del> </del>                                     | <u> </u>   | <del> </del>                                     |                |               |            |
| 81              | <del>                                     </del> | <del></del>                                      | <del>  </del>                                    |                |               |            |
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| 83              | <del> </del>                                     | <del>                                     </del> |  |                |               |            |
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| 85              | <del> </del>                                     | <del></del>                                      | <del>  </del>                                    |                |               |            |
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| TOTAL<br>IND.   |  | _  |  |                | $\neg \dashv$ | ╗          |
| TOTAL<br>DEP.   |  | 4  |  | <b>⊷</b> ⁵ ∤   |               | <b>-</b> * |
| TOTAL<br>CLAIMS |  | . 2  |  | - <b>3</b> 5 · |               | *          |

\* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS

FORM **PTO-2022** (1-98)

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